

# PROVIDER QUICK POINTS

## PROVIDER INFORMATION



January 8, 2018

### Pharmacy Benefit Exclusion for Luxturna

Effective January 15, 2018, Luxturna (voretigene neparovec-rzyl) will be excluded from pharmacy benefit coverage due to its subretinal and clinician-administered route of administration.

In addition, a Provider Bulletin will be published soon regarding medical coverage criteria for Luxturna.

Drug Name
Luxturna (voretigene neparovec-rzyl) Subretinal Injection

### Products Impacted

This notice applies to commercial lines of business **and** the following Minnesota Health Care Programs:

- Blue Advantage Prepaid Medical Assistance Program (PMAP)
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+)
- SecureBlue (MSHO)

### Products Not Impacted

Federal Employee Program, Platinum Blue, and Medicare Supplement subscribers are not impacted.

### Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.